

Exhibit A

*Cape Health Solutions, L.L.C.
650 Townbank Rd
North Cape May, NJ 08204
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Daniel J. Boyle, MD

Michael G. Maroldo, MD

May 4, 2005

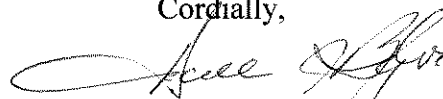
Dr. Mr. Kaplan

I am writing to you in response to your request regarding the medical problems of my patient, Mr. David Magee. Please find attached a note regarding his most recent visit to my office. This should outline the circumstances around his acute coronary event, which started the cascade of medical problems that the patient had and is continuing to experience. I understand, from your letter, that under admiralty law, the ship owner is obligated to pay "maintenance and cure" because the disabling condition occurred while in the service of the vessel. Clearly, that is the case. It was during the time that the patient was hauling nets, which is heavy physical exertion, when he first experienced symptoms. His symptoms were classic for an acute coronary syndrome and undoubtedly were precipitated by the heavy work that he was doing.

With regard to the question of negligence and/or un-seaworthiness, the patient tells me, and you noted in your letter to me, that the drums were inadequate size for the nets and the rollers. If indeed that is correct, then it would appear to me that negligence occurred which further exacerbated the situation precipitating his condition of acute coronary syndrome. Also, it is likely that the exhortations from the captain to the crew to work faster, so that the nets were hauled before entering a restricted area, could also be considered negligent. Certainly, the fact that he was hurrying while working also exacerbated the condition and contributed to his experiencing an acute coronary event. If he had not experienced a coronary event he would not have been given Heparin. The gastrointestinal bleeding that he experienced because of the Heparinization is also directly related to the acute coronary event. If his coronary artery disease had been diagnosed absent an acute coronary event, he could have been treated without the Heparin and therefore without suffering the gastrointestinal bleed. His occult malignancy would have caused him problems and necessitated surgeries notwithstanding what occurred on board the "It Ain't Easy" in December of 2002.

I hope this information is responsive to your questions. Please to not hesitate to contact me.

Cordially,


Daniel J. Boyle, MD

MAGEE, DAVID

04/26/05

Comprehensive Physical Exam

David Magee is a patient who has been under my care since January of 2003. He came to me as a result of acute coronary syndrome. Chief complaint: Acute coronary syndrome. History of present illness, the patient who is 50-years-old, enjoyed his usual state of good health until December 12, 2002 when he was hauling nets on the fishing boats, (It Ain't Easy) and developed chest pain. He was part of a crew that was hurriedly hauling in nets. There was extra stress at this time because the boat was on the border of a closed area and entering this area would result in fines therefore, the captain was exhorting the crew to hurry. The work was also more arduous than usual because the drum that held the nets and rollers was too small to accommodate them adequately and this required extra tugging and pulling on the nets to straighten them out. During this work that exceeding the normal level of work that the patient would have to do hauling nets by virtue of the undersized drum and by virtue of the exhortation of the captain to hurry, precipitated jaw pain, left arm pain, shortness of breath, tingling in the fingers. The patient was then air lifted by the Coast Guard to Cape Cod Hospital in Hyenas Port, where he was diagnosed as having an acute coronary syndrome. He was given Heparin but developed gastrointestinal bleeding from an occult gastrointestinal malignancy. He was ultimately stabilized and had coronary bypass surgery in March of 2003. He was then felt to be stable enough to have a Whipple procedure in April of 2003 for his gastrointestinal malignancy both in the descending colon and duodenum. He had sutures placed in the pancreas and the sutures did not hold causing pancreatic digestive juices to spill throughout the abdomen, which caused autolysis of the spleen necessitating a splenectomy. The patient as a result of his complicated medical history also developed a deep vein thrombosis and pulmonary embolus. Also because of his multiple surgeries, he developed nonhealing of his abdominal wound requiring yet another surgical procedure after the splenectomy and he is left with a large abdominal incisional hernia because of all of this.

Past Medical History: See above illness: The patient was diagnosed as having Diabetes Mellitus and coronary artery disease as noted above. Meds: He takes Aspirin a day and Cialis.

Social history: He is a 1/2 pack a day smoker and a nondrinker.

Family history: His mother died at age 78 of peritonitis. His father died at age 68 with carcinoma of the pancreas. He has a 60-year-old half brother that has lymphoma and appears to be in remission. He has no children.

Review of Systems: HEENT: Negative. Cardiorespiratory: Negative. GI: Negative. GU: The patient complains of erectile dysfunction. Musculoskeletal: Negative. Cutaneous: Negative. Physical exam today, the patient's weight is up 9 pounds at 305. Blood pressure 100/62. Pulse 70. R 12. T 97.4. HEENT: PERRL. EOM is intact. Fundi are benign. TMs are clear. Pharynx is clear. Neck is supple. There are no nodes or bruits. There is a normal thyroid. Chest is symmetrical. There is a mediastinotomy incision. Heart: Regular rhythm. S1/S2 normal. Lungs: Clear. Abdomen: There is a large incisional abdominal hernia. There are no visceromegaly or masses. Bowel sounds are active. Genital and rectal exam was deferred. DP and PT pulses are 1/2 +/2+ bilaterally, without edema or cyanosis. Lab: The patient had a blood glucose which is elevated at 145. He had a normal CEA and CBC. The rest of his chemistries were within normal limits. Diagnoses: Coronary artery disease, status post carcinoma of the duodenum and descending colon. Diabetes Mellitus, status post DVTs, and erectile dysfunction.

Plan: The patient will be started back on Glucophage for treatment of his diabetes. He will continue to take Aspirin and Cialis as prescribed. The patient will be seen for followup in two months after a Hemoglobin A1C is obtained.

DJB:cs

DANIEL J. BOYLE, M.D.
Curriculum Vitae January 2005

BIOGRAPHIC AND PERSONAL INFORMATION:

ADDRESS: 116 West 25th Ave
North Wildwood NJ 08204

OFFICE: 650 Townbank Road
North Cape May New Jersey 08204
(609) 898-7447

DATE OF BIRTH: August 28, 1946

PLACE OF BIRTH: Upper Darby, PA

SPOUSE: Margaret R. Boyle

DATE OF BIRTH: February 3, 1947

ACADEMIC HISTORY:

1960 – 1964 South Hills Catholic High School
Pittsburgh, PA
Graduated

1964 – 1968 Wheeling College
Wheeling, West Virginia
Bachelor of Science

1969 – 1973 Georgetown University School of Medicine
Washington, DC
Doctor of Medicine

1973 – 1974 Georgetown University Hospital
Washington, DC
Residency

1997-1998 National Institute for Program
Director Development
Fellowship

CERTIFICATION: The American Board of Family Practice 1977
Recertification Dates: 1984, 1991, 1997, 2003
Certificate of Added Qualification: Sports Medicine 1995

PROFESSIONAL WORK EXPERIENCE:

1974 – 1983	Group Family Practice Cornelsen, Cullen and Boyle, P.A. 5103 Marlboro Pike Hillside, Maryland
1983 – 1990	Solo Private Practice, Family Medicine Daniel J. Boyle, M.D. 10313 Georgia Avenue, suite 201 Silver Spring, Maryland
1990 – 1991	Group Family Practice Boyle, Delaney and Swink, MD's 10313 Georgia Avenue, Suite 201 Silver Spring, Maryland
1992 – 1994	Solo Family Practice Daniel J. Boyle, M.D. 10313 Georgia Avenue, Suite 201 Silver Spring, Maryland
1994 – 1996	Healthways Family Medical Center 10313 Georgia Avenue, Suite 201 Silver Spring, Maryland
1996 – 2001	Chairman, Department of Family Practice St. Francis Medical Center 4221 Penn Avenue, Suite 100 Pittsburgh, PA 15224
2001-PRESENT	Group Family Practice Cape Health Solutions 650 Townbank Road North Cape May New Jersey 08204
1986 – 1987	Medical Home Visit Radio Talk Program Host
1997 – 2000	Radio Show Host KQV Health Beat
1999 2001	Medical Director St. Francis Physicians, Inc. 4117 Liberty Avenue Pittsburgh, PA 15224 (412) 605-6046
2000-2001	Vice-president Ambulatory and Community Health St. Francis Medical Center 5213 Penn Avenue Pittsburgh, PA. 15224

HOSPITAL AFFILIATION

Burdette Tomlin Memorial Hospital
 2 Stone Harbor Blvd.
 Cape May Courthouse, New Jersey 08210

LICENSURE:

State of New Jersey MA 72321(2001-Present)

ACADEMIC APPOINTMENTS:

George Washington University School of Medicine
 Washington, DC 20037
 - Family Practice Department Instructor

Georgetown University of School of Medicine
 Washington, DC 20007
 - Family Practice Department Instructor

COMMITTEES & APPOINTMENTS:

1970 – PRESENT	Knights of Columbus 4 th Degree
1978	Candidate, Maryland House of Delegates
1973 – 1975	Member, Citizens Advisory Board of Education Montgomery County Maryland for Sex Education
1975 – 1978	Member of the Board Maryland Right to Life
1980 – 1981	President of the Board Maryland Action for Human Life
1985 – 1987	Member of the Parish Council, St. Johns, Silver Spring, MD
1988 – 1991	Member of the Parish Council, St. Johns, McLean, VA
1994 – 1996	Member Board of Governors Archbishop Dennis J. O'Connell High School Arlington, VA
1997 – 2001	Medico – Legal Committee, ACMS ACMS, Pittsburgh, PA
1998– 1999	Alternate Delegate Pennsylvania Medical Society
1998-2001	Medical Director St. Francis Home Health Services St. Francis Home Infusion Services

1998-2001	St. Francis Corporate Compliance Committee St. Francis Corporate Compliance Executive Committee
2000-2001	Delegate Pennsylvania Medical Society
2000-2002	Member American College of Physician Executives
2003-present	Member Peer Review Committee, Burdette Tomlin Memorial Hospital
2004-present	Chief, Division of Family Practice, Burdette Tomlin Memorial Hospital
2005- present	Member Quality Improvement Committee, Burdette Tomlin Memorial Hospital

COMMUNITY SERVICE:

1980 -2001	Catholic Youth Organization Baseball/Basketball Coach
1976 – 1996	Right to Life Speaker Bureau
1985 – 1996	Gonzaga College High School Team Physician
1982 – 1996	Auctioneer Parish Auction
1996 –2001	Central Catholic High School Team Physicians

PUBLICATIONS:

1999	<i>Sports Medicine Handbook for Coaches and Parents</i> Georgetown University Press
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CAPE HEALTH SOLUTIONS, LLC

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Daniel J. Boyle, MD

Michael G. Maroldo, MD

Dear Mr. Kaplan:

October 11th, 2005

The following is my fee schedule

Record Review

\$300/hour two hour minimum

Deposition Testimony

\$400/ hour plus expenses eg. travel 2 hour minimum

Trial testimony

\$3500/Day plus expenses

Deposition Testimony

2001

Opalka v. Berger 10/2
Wellner v. Nystrom 11/1
Kelley v. Kaiser 11/12
Peterkin v. Sandhu
Copeland v. Hudson-Stanton

2002

Brown v. Kaiser 1/3
Ludlum v. Singh 1/10
McFarland v. Hatton 2/22
Radford v. Jackson 3/21
Castle v. Hollander 4/5
Harold v. Pottschmitt 5/16
Ackerson v. Vera 5/30
Fiore v. Rao 5/31
Elberson v. Smith 6/6
Fletcher v. Lilly 6/28
Paulus v. Chiteman 7/11
Dehn v. Edgecombe 7/11
Gearhart v. Chesapeake Family Practice 8/9
Williams v. Fieldson 8/27
Moasser v. Blackburn 9/4
Brown v. Lee 10/23
Carter v. Flynn 10/24
Shoemaker v. Kaiser 11/14
Gill v. Rupert 12/10
Senior v. Kaiser 12/12

2003

Luskin v. Zala
Yates v. Simmons Clemmons 1/23
Davis v. DePena 2/12
Locket v. Kaiser 2/21
Heidenreich v. Gallitan 7/23
Jefferies v. Tilly 10/1
Yankey v. Pickert 10/30
Thomas v. LaFleur 12/12

2004

Pfeffer Fisher 1/21
Keefer v. Franklin Square Hospital 1/29
Patrick v. Minnick 3/23

Wood v. Folkmer 4/13
Coon v. Patel 5/13
Sneigle v. Allen 5/20
Tice v. Soriano 8/24
Raspe v. Benjamin 9/9
Gibson v. Mid Ohio Valley Medical Group 10/20
Roussell v. Akal 12/22

2005

Hamilton v. Potomac Physicians 1/05
Postell v. Holy Cross Hospital 1/06
Bailey v. Mahmood 2/10
Cropper v. Oung 4/12
Grimstead v. Brockington 4/18
Sisas v. Anne Arundel Medical Center 6/2
Temby v. Bell 7/14

Trial Testimony

2001

Sann v. Barker
Jones v. Hartig
Berger v. Henry
BPQA v. Hewitt (administrative hearing)
Jones v. Loya

2002

Harold v. Pottschmitt 5/30
Dehn v. Edgecomb 7/25
Paulus v. Chiteman 9/13
Newbold v Western Maryland Hospital 10/25 (administrative hearing)

2003

Jewell v. Angco 2/26
BPQA v. Pickert 5/15 (administrative hearing)
Lawson v. McCready 11/6

2004

Drach v. Biggans 5/29
Kennedy v. Bennett 9/8

2005

Hanrahan V. Moody 6/8